

**This form does not need to be completed for experience which has been accrued at a Tennessee Public School. Use this form in reporting non-public school teaching experience accrued in Tennessee, public and non-public school teaching experience accrued outside of Tennessee, and administrative or teaching experience in approved colleges and universities.**

Name	Social Security Number	Teacher Reference Number
School System	State	School System's Telephone Number

Name of School	Position and Grade Level	School Year		Time Served		Full Time or Indicate % Part Time
		Start Date Mo/Day/Yr	End Date Mo/Day/Yr	Month(s)	Day(s)	

(State Department of Education or Assoc. of Colleges & Schools)

I hereby certify that the above listed experience is a true and correct copy of the records on file for the teacher named above. ***(This form must be signed by an official from the school system central office.)***

Address			
Street/P.O. Box	City	State	Zip Code

ED4007